

Supplemental Application Data Sheet

Application Information

Application number::	10/693,228
Filing Date::	10/24/03
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	2176
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	GROUP SHARED SPACES
Attorney Docket Number::	224557 <u>30835/306083</u>
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets	20
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Michael
Family Name::	Shappell
City of Residence::	Issaquah,
Street of mailing address::	4352 243rd Ave SE
City of mailing address::	Issaquah
State or Province of mailing address::	WA
Postal or Zip Code of mailing address::	98029

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Ravi
Middle Name:: T.
Family Name:: Rao
City of Residence:: Redmond
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 6051 137th Ave NE, #331
City of mailing address:: Redmond
State or Province of mailing address:: WA
Postal or Zip Code of mailing address:: 98052

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: John
Middle Name:: L.
Family Name:: Miller
City of Residence:: Woodinville
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 13433 NE 146th St.
City of mailing address:: Woodinville
State or Province of mailing address:: WA
Postal or Zip Code of mailing address:: 98072

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Scott

Middle Name:: A.
Family Name:: Senkeresty
City of Residence:: Duvall
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 15717 278th Ave. NE
City of mailing address:: Duvall
State or Province of mailing address:: WA
Postal or Zip Code of mailing address:: 98019

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Brian
Middle Name:: R.
Family Name:: Lieuallen
City of Residence:: Redmond
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 7825 135th Avenue N.E.
City of mailing address:: Redmond
State or Province of mailing address:: WA
Postal or Zip Code of mailing address:: 98052

Correspondence Information

Correspondence Customer Number:: ~~38887~~ 45373

Representative Information

Representative Customer Number:: ~~38887~~ 45373

Domestic Priority Information

Foreign Priority Information

Assignee Information